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First Named Inventor

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POWER OF ATTORNEY

REVOCATION OF POWER OF ATTORNEY

SCOTT MENDEL

CFO. THE ACTIVE NETWORK, INC.

forms are submitted.

Signature

Title and Company

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elemeture is required, see below.

Name

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| | Examiner Name | | |
| | Attorney Docket Number | ACNET-192A | |
| hereby revoke all previous powers of attorney given | n the above-identified a | polication. | |
| A Power of Attorney is submitted herewith. | | | |
| hereby appoint Practitioner(s) associated with the following Number as mylour attorney(s) or agent(s) to prosecute the intentified above, and to transact all business in the United S and Tradement Office connected therewith: OR | spolication | 07663 | |
| I hereby appoint Practitioner(s) named below as my/our atto to transact all business in the United States Patent and Trac | mey(s) or agent(s) to prosect lemark Office connected then | ute the application identified swith: | above, and |
| Practitioner(s) Name | Registration Number | | |
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| Applicant/Inventor. OR | | | |
| OR Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitte | ed herewith or filed on | | |

This coloration of information is required by 37 CFR 1.31.1.32 and 1.33. This information is required to obtain or retain a specific by the guidate victor in to 46 (etc. by the UBFTC) to process an application. Confidentiality is governed by 35 U.S.C. 172 Life 1.00 confidentiality is g

SIGNATURE of Applicant or Assignee of Record

NOTE: Signatures of all the inveniors or assignoes of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one

Date